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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## for FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 100.00

### Complete if Known

Application Number	10/043,700
Filing Date	January 11, 2002
First Named Inventor	Robert Andrew Rhodes
Examiner Name	Jason M. Perilla
Art Unit	2634
Attorney Docket No.	PU010148

### METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order

☐ None

☐ Other (please identify):

Customer Number 24498

☒ Deposit Account: Deposit Account Number 07-0832

Deposit Account Name: THOMSON LICENSING INC.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below

☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17

☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

#### 2. EXCESS CLAIM FEES

##### Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims 22 - 20 or HP = 2 Extra Claims Fee (\$50) Fee Paid (\$100)

HP = highest number of total claims paid for, if greater than 20.

Independent Claims 3 - 3 or HP = 0 Extra Claims Fee (\$200) Fee Paid (\$0)

HP = highest number of independent claims paid for, if greater than 3.

Small Entity	
Fee (\$)	Fee (\$)
50	25
200	100
360	180
Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets - 100 = Extra Sheets / 50 = Number of each additional 50 or fraction thereof Fee (\$50) Fee Paid (\$100)

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): FEE FOR ADDITION OF 2 DEPENDENT CLAIMS

Fees Paid (\$)

\$100

### SUBMITTED BY

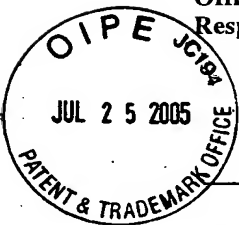
Name (Print/Type)	GUY H. ERIKSEN	Registration No. (Attorney/Agent)	41,736	Telephone	(609) 734-6808
Signature					July 22, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

CUSTOMER NO.: 24498  
Serial No.: 10/043,700  
Office Action dated: May 24, 2005  
Response dated: July 22, 2005

PATENT  
PU010148

2634



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Robert Andrew Rhodes et al.

Serial No.: 10/043,700

Filed: January 11, 2002

For: MULTI-MODE BIDIRECTIONAL  
COMMUNICATIONS DEVICE INCLUDING  
A DIPLEXER HAVING A SWITCHABLE  
NOTCH FILTER

Examiner: Jason M. Perilla

Group Art: 2634

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

July 22, 2005  
(Date of Deposit)

Patricia M. Fedorowycz  
Patricia M. Fedorowycz  
Patricia M. Fedorowycz  
Signature

July 22, 2005  
(Date of Signature)

AMENDMENT UNDER 37 C.F.R. §1.111

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Please amend the above-identified application as follows:

**Listing and Amendments to the Claims** begin on page 2 of this paper.

**Remarks/Arguments** begin on page 6 of this paper.

07/26/2005 SFELEKE1 00000042 070832 10043700

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